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Bib Data Sheet

CONFIRMATION NO. 5528

SERIAL NUMBER 10/803,455	FILING OR 371(c) DATE 03/18/2004 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. A-1916
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/455,843 03/18/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

06/02/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials				

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TITLE

Optimized suture braid

FILING FEE RECEIVED 567	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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